

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No. AUS920010819US2 First Inventor Michael Wayne Brown Title Intermediary Device Initiated Caller Identification Express Mail Label No. ET 464044075 US
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(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. <ol style="list-style-type: none"> 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>39</u>] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>4</u>] 5. Oath or Declaration [Total Pages <u> </u>] <ol style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i> <ol style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 <ol style="list-style-type: none"> 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ol style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ol style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies 																				
ACCOMPANYING APPLICATION PAPERS <ol style="list-style-type: none"> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: 																					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. <table style="width: 100%; font-size: small;"> <tr> <td><input type="checkbox"/> Continuation</td> <td><input checked="" type="checkbox"/> Divisional</td> <td><input type="checkbox"/> Continuation-in-part (CIP)</td> <td>of prior application No.:</td> <td><u>10, 015,281</u></td> </tr> <tr> <td colspan="3">Prior application information: Examiner: <u>Elahee MD S</u></td> <td colspan="2">Group Art Unit: <u>2697</u></td> </tr> </table> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>		<input type="checkbox"/> Continuation	<input checked="" type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No.:	<u>10, 015,281</u>	Prior application information: Examiner: <u>Elahee MD S</u>			Group Art Unit: <u>2697</u>											
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19. CORRESPONDENCE ADDRESS <table style="width: 100%; font-size: small;"> <tr> <td><input type="checkbox"/> Customer Number or Bar Code Label</td> <td style="border: 1px solid black; text-align: center;">[Insert Customer No. or Bar Code Label Here]</td> <td>or</td> <td><input checked="" type="checkbox"/> Correspondence address below</td> </tr> </table>		<input type="checkbox"/> Customer Number or Bar Code Label	[Insert Customer No. or Bar Code Label Here]	or	<input checked="" type="checkbox"/> Correspondence address below																
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<table style="width: 100%;"> <tr> <td style="width: 25%;">Name</td> <td colspan="3">Biggers & Ohanian PLLC</td> </tr> <tr> <td>Address</td> <td colspan="3">504 Lavaca St. St 970</td> </tr> <tr> <td>City</td> <td>Austin</td> <td>State</td> <td>TX</td> </tr> <tr> <td>Country</td> <td>U.S.A.</td> <td>Telephone</td> <td>512-472-9881</td> </tr> <tr> <td></td> <td></td> <td>Zip Code</td> <td>78701-2856</td> </tr> </table>		Name	Biggers & Ohanian PLLC			Address	504 Lavaca St. St 970			City	Austin	State	TX	Country	U.S.A.	Telephone	512-472-9881			Zip Code	78701-2856
Name	Biggers & Ohanian PLLC																				
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		Zip Code	78701-2856																		

Name (Print/Type) H. Artough Ohanian	Registration No. (Attorney/Agent)	46,022
Signature	Date	8-22-03

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

03917 U.S. PTO

10/6/99 09/22/03

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003, Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,386.00

Complete if Known

Application Number	Not Yet Assigned
Filing Date	Herewith
First Named Inventor	Michael Wayne Brown
Examiner Name	NYA
Art Unit	NYA
Attorney Docket No.	AUS920010819US2

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 09-0447

Deposit Account Name IBM Corporation

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001	2001	750	375	Utility filing fee	750.00
1002	2002	330	165	Design filing fee	
1003	2003	520	260	Plant filing fee	
1004	2004	750	375	Reissue filing fee	
1005	2005	160	80	Provisional filing fee	
SUBTOTAL (1)					(\$) 750.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
32	-20** = 12	X 18	= 216
8	-3** = 5	X 84	= 420

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
1202	2202	18	9	Claims in excess of 20
1201	2201	84	42	Independent claims in excess of 3
1203	2203	280	140	Multiple dependent claim, if not paid
1204	2204	84	42	** Reissue independent claims over original patent
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 636.00

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051	2051	130	65	Surcharge - late filing fee or oath	
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet	
1053	2053	130	65	Non-English specification	
1812	2520	2,520	1,260	For a filing request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	2251	110	55	Extension for reply within first month	
1252	2252	410	205	Extension for reply within second month	
1253	2253	930	465	Extension for reply within third month	
1254	2254	1,450	725	Extension for reply within fourth month	
1255	2255	1,970	985	Extension for reply within fifth month	
1401	2401	320	160	Notice of Appeal	
1402	2402	320	160	Filing a brief in support of an appeal	
1403	2403	280	140	Request for oral hearing	
1451	2451	1,510	755	Petition to institute a public use proceeding	
1452	2452	110	55	Petition to revive - unavoidable	
1453	2453	1,300	650	Petition to revive - unintentional	
1501	2501	1,300	650	Utility issue fee (or reissue)	
1502	2502	470	235	Design issue fee	
1503	2503	630	315	Plant issue fee	
1460	2460	130	65	Petitions to the Commissioner	
1807	2807	50	25	Processing fee under 37 CFR 1.17(g)	
1806	2806	180	90	Submission of Information Disclosure Stmt	
8021	4021	40	20	Recording each patent assignment pro property (times number of properties)	
1809	2809	375	187.5	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	2810	375	187.5	For each additional invention to be examined (37 CFR 1.129(b))	
1801	2801	375	187.5	Request for Continued Examination (RCE)	
1802	2802	900	450	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type) H. Artouh Ohanian

Registration No. 46,022

(Attorney/Agent)

(Complete if applicable)

Telephone 512-472-9881

Signature

Date 8-22-03

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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Certificate of Mailing by Express Mail

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Deborah Roszkowski
Deborah Roszkowski

8/22/03
Date

Enclosures:
Patent Application AUS920010819US2
Copy of Declaration
Copy of Recordation of Assignment
Drawings (4) pages
Return Postcard
Transmittals